

County: Walworth  
 KIWANIS MANOR, INC.  
 3271 NORTH STREET

Facility ID: 3880

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EAST TROY 53120 Phone:(262) 642-3995  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/05): 50  
 Total Licensed Bed Capacity (12/31/05): 50  
 Number of Residents on 12/31/05: 46

Ownership: Non-Profit Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? Yes  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 47

Age, Gender, and Primary Diagnosis of Residents (12/31/05)				Length of Stay (12/31/05)	
Primary Diagnosis	%	Age Groups	%		%
Developmental Disabilities	0.0	Under 65	8.7	Less Than 1 Year	41.3
Mental Illness (Org./Psy)	43.5	65 - 74	6.5	1 - 4 Years	47.8
Mental Illness (Other)	2.2	75 - 84	39.1	More Than 4 Years	10.9
Alcohol & Other Drug Abuse	0.0	85 - 94	34.8		-----
Para-, Quadra-, Hemiplegic	2.2	95 & Over	10.9		100.0
Cancer	0.0		-----	Full-Time Equivalent	
Fractures	0.0		100.0	Nursing Staff per 100 Residents	
Cardiovascular	8.7	65 & Over	91.3	(12/31/05)	
Cerebrovascular	13.0		-----	RNs	8.4
Diabetes	2.2	Gender	%	LPNs	13.9
Respiratory	4.3		-----	Nursing Assistants,	
Other Medical Conditions	23.9	Male	32.6	Aides, & Orderlies	
	-----	Female	67.4		42.7
	100.0		-----		
			100.0		

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 Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All
	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	36	100.0	127	0	0.0	0	10	100.0	180	0	0.0	0	0	0.0	0	46	100.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		36	100.0		0	0.0		10	100.0		0	0.0		0	0.0		46	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	13.2	Bathing	4.3	91.3	4.3	46
Private Home/With Home Health	0.0	Dressing	17.4	82.6	0.0	46
Other Nursing Homes	4.4	Transferring	23.9	67.4	8.7	46
Acute Care Hospitals	76.5	Toilet Use	23.9	67.4	8.7	46
Psych. Hosp.-MR/DD Facilities	0.0	Eating	89.1	10.9	0.0	46
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0	*****				
Total Number of Admissions	68	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	13.0		Receiving Respiratory Care	0.0
Private Home/No Home Health	8.3	Occ/Freq. Incontinent of Bladder	63.0		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	31.9	Occ/Freq. Incontinent of Bowel	32.6		Receiving Suctioning	0.0
Other Nursing Homes	2.8				Receiving Ostomy Care	0.0
Acute Care Hospitals	6.9	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	13.0
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	41.7	With Pressure Sores	2.2		Have Advance Directives	89.1
Total Number of Discharges		With Rashes	4.3		Medications	
(Including Deaths)	72				Receiving Psychoactive Drugs	69.6

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Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit Peer %	Group Ratio	Bed Size: 50-99 Peer %	Ratio	Licensure: Skilled Peer %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.0	94.2	1.00	88.1	1.07	88.3	1.06	88.1	1.07
Current Residents from In-County	56.5	76.6	0.74	73.2	0.77	70.5	0.80	77.6	0.73
Admissions from In-County, Still Residing	17.6	23.1	0.76	17.1	1.03	20.5	0.86	18.1	0.97
Admissions/Average Daily Census	144.7	116.9	1.24	157.6	0.92	123.5	1.17	162.3	0.89
Discharges/Average Daily Census	153.2	121.8	1.26	161.4	0.95	126.7	1.21	165.1	0.93
Discharges To Private Residence/Average Daily Census	61.7	52.4	1.18	63.4	0.97	50.1	1.23	74.8	0.82
Residents Receiving Skilled Care	100	98.1	1.02	96.2	1.04	94.1	1.06	92.1	1.09
Residents Aged 65 and Older	91.3	97.5	0.94	93.7	0.97	92.5	0.99	88.4	1.03
Title 19 (Medicaid) Funded Residents	78.3	66.4	1.18	68.3	1.15	70.2	1.11	65.3	1.20
Private Pay Funded Residents	21.7	23.7	0.92	20.2	1.08	19.0	1.14	20.2	1.08
Developmentally Disabled Residents	0.0	0.3	0.00	0.6	0.00	0.5	0.00	5.0	0.00
Mentally Ill Residents	45.7	37.4	1.22	34.6	1.32	37.2	1.23	32.9	1.39
General Medical Service Residents	23.9	22.9	1.04	24.3	0.99	23.8	1.01	22.8	1.05
Impaired ADL (Mean)	37.0	49.9	0.74	49.5	0.75	47.2	0.78	49.2	0.75
Psychological Problems	69.6	57.1	1.22	58.5	1.19	58.9	1.18	58.5	1.19
Nursing Care Required (Mean)	2.4	6.4	0.38	6.5	0.38	7.1	0.34	7.4	0.33